

STATE OF MICHIGAN
DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES
Before the Director of the Department of Insurance and Financial Services

In the matter of:

**Therapeutic Healing
Petitioner**

File No. 21-1219

v

**Auto Club Insurance Company
Respondent**

**Issued and entered
this 23rd day of September 2021
by Sarah Wohlford
Special Deputy Director**

ORDER

I. PROCEDURAL BACKGROUND

On August 4, 2021, Therapeutic Healing (Petitioner) filed with the Department of Insurance and Financial Services (Department) a request for an appeal pursuant to Section 3157a of the Insurance Code of 1956 (Code), 1956 PA 218, MCL 500.3157a. The request for an appeal concerns the determination of Auto Club Insurance Company (Respondent) that the Petitioner overutilized or otherwise rendered or ordered inappropriate treatment, products, services, or accommodations under Chapter 31 of the Code, MCL 500.3101 to MCL 500.3179.

The Petitioner's appeal is based on the denial of a bill pursuant to R 500.64(3), which allows a provider to appeal to the Department from the denial of a provider's bill. The Petitioner now seeks reimbursement in the full amount it billed for the dates of service at issue.

The Department accepted the request for an appeal on August 9, 2021. Pursuant to R 500.65, the Department notified the Respondent and the injured person of the Petitioner's request for an appeal on August 9, 2021 and provided the Respondent with a copy of the Petitioner's submitted documents. The Respondent filed a reply to the Petitioner's appeal on August 27, 2021.

The Department assigned an independent review organization (IRO) to analyze issues requiring medical knowledge or expertise relevant to this appeal. The IRO submitted its report and recommendation to the Department on September 7, 2021.

II. FACTUAL BACKGROUND

This appeal concerns the denial of payment for massage therapy treatments rendered on June 14 and 18, 2021, under procedures code 97140, which is described as manual therapy techniques. With its appeal request, the Petitioner submitted documentation that indicates that the injured person was in a motor vehicle accident in December 1988. The Petitioner's medical documentation for the dates of service at issue note the massage therapy plan and goals included decrease soft tissue restrictions, improve overall tonicity, reduce and increase range of motion by using manual therapies, in "an effort to improve the [the injured person's] quality of living."

In its determination, the Respondent denied payment for the massage therapy for the dates of services at issue. The determination noted that the recommended frequency and duration of treatment based on the Official Disability Guidelines (ODG) for massage therapy to treat chronic pain is 1 to 2 times per week for a duration of 6 weeks. The Respondent argues that based on its review of the medical record, the massage therapy treatments were not supported as there was no significant functional benefit documented.

In its reply, the Respondent reaffirmed its position that the massage therapy treatments provided on the dates of service at issue were not medically necessary and overutilized. The Respondent noted that the injured person has "completed in excess of 40 massage therapy visits since 1/1/2021."

III. ANALYSIS

Director's Review

Under MCL 500.3157a(5), a provider may appeal an insurer's determination that the provider overutilized or otherwise rendered inappropriate treatment, products, services, or accommodations, or that the cost of the treatment, products, services, or accommodations was inappropriate under Chapter 31 of the Code. This appeal involves a dispute regarding inappropriate treatment and overutilization.

The Director assigned an IRO to review the case file. In its report, the IRO reviewer concluded that, based on the submitted documentation, the massage therapy treatments provided on the dates of service at issue were not medically necessary and the treatments were overutilized in frequency or duration based on medically accepted standards.

The IRO reviewer is a board-certified neurologist with hands-on experience with the type of treatments provided in this dispute. In its report, the IRO reviewer referenced R 500.61(i), which defines "medically accepted standards" as the most appropriate practice guidelines for the treatment provided. These may include generally accepted practice guidelines, evidence-based practice guidelines, or any other practice guidelines developed by the federal government or national or professional medical societies, board, and associations. The IRO reviewer relied on the Official Disability Guidelines (ODG) and medical literature regarding chronic pain treatments.

The IRO reviewer opined:

According to the Official Disability Guidelines (ODG), recommends massage therapy for pain at a frequency of 1 to 2 times per weeks for 6 weeks. A maximum duration of 2 months is recommended unless the patient has shown functional improvement and there are special circumstances such as re-injury, interrupted continuity of care, exacerbation of symptoms, and in those with comorbidities. In this case the [injured person] has exceeded the recommended number of sessions and the records fail to establish special circumstances that would substantiate additional sessions.

Based on the above, the IRO reviewer recommended that the Director uphold the Respondent's determination that the message therapy treatments provided to the injured person on June 14 and 18, 2021 were not medically necessary in accordance with medically accepted standards, as defined by R 500.61(i).

IV. ORDER

The Director upholds the Respondent's determination dated June 29, 2021.

This is a final decision of an administrative agency. A person aggrieved by this order may seek judicial review in a manner provided under Chapter 6 of the Administrative Procedures Act of 1969, 1969 PA 306, MCL 24.301 to 24.306. MCL 500.244(1); R 500.65(7). A copy of a petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of Research, Rules, and Appeals, Post Office Box 30220, Lansing, MI 48909-7720.

Anita G. Fox
Director
For the Director:

 Recoverable Signature

X *Sarah Wohlford*

Sarah Wohlford
Special Deputy Director
Signed by: Sarah Wohlford